

## **Board guidelines in filing a request for variance from a standard 1:1 technician to pharmacist ratio.**

Note: A pharmacist may presently supervise two technicians at the same time if both are performing IV admixture and other sterile product preparation, filling unit dose cassettes, prepackaging or bulk compounding, or if one of the two is a technician in training.

### **Design and equipment** (16 points possible, must score 12 or above)

- ✓ Draw layout of pharmacy work area, including dimensions. Include pictures of the staff at work behind the counter if possible for help in visualization.
- ✓ Draw physical layout of patient counseling area.
- ✓ List automatic counting devices, robots or other technology if applicable.

### **Information system** (16 points possible, must score 12 or above)

- ✓ List software system used for prescription filling.
- ✓ List software system or other items used for patient education.
- ✓ Describe software used to notify pharmacist of drug-drug or drug-food interactions.
- ✓ Are pharmacy interventions tracked, and if so, how?

### **Workflow elements** (52 points possible, must score 37 or above)

- ✓ Describe present 1:1 workflow and major duties of pharmacists, technicians and clerks as they pertain to the handling of prescriptions. A flowchart is preferable.
- ✓ Describe proposed 2:1 workflow and major duties of pharmacists, technicians and clerks as they pertain to the handling of prescriptions. A flowchart is preferable.
- ✓ List any collaborative practice agreements, DSM or other clinical programs presently provided or planned.
- ✓ Describe patient services presently provided and any new services planned.

### **Quality assurance measures** (16 points possible, must score 12 or above)

- ✓ List pharmacists on staff.
- ✓ List certified pharmacy technicians and technicians-in-training on staff.
- ✓ Include policies and procedures pertaining to prescription filling and patient counseling, and signatures of staff on file at the pharmacy.
- ✓ Include policies and procedures pertaining to quality assurance and/or continuous quality improvement on file at the pharmacy. If no policies and procedures exist, what methods are used for quality assurance and continuous quality improvement in the pharmacy? Are errors presently tracked, or do you have plans to do so? Do you know your present error rate?